

United States; to the Committee on the Judiciary.

By Mr. SANTORUM:

S. 598. A bill to amend the Federal Agriculture Improvement and Reform Act of 1996 to improve the farmland protection program; to the Committee on Agriculture, Nutrition, and Forestry.

By Mr. CHAFEE (for himself, Mr. HATCH, Mr. COCHRAN, Ms. SNOWE, Mr. ROBERTS, Mr. SPECTER, and Ms. COLLINS):

S. 599. A bill to amend the Internal Revenue Code of 1986 to provide additional tax relief to families to increase the affordability of child care, and for other purposes; to the Committee on Finance.

By Mr. WELLSTONE:

S. 600. A bill to combat the crime of international trafficking and to protect the rights of victims; to the Committee on Foreign Relations.

By Mr. COCHRAN:

S. 601. A bill to improve the foreign language assistance program; to the Committee on Health, Education, Labor, and Pensions.

By Mr. SHELBY (for himself, Mr. BOND, Mr. COVERDELL, Mr. HAGEL, Mr. KYL, Mr. BURNS, Mr. GRAMM, Mr. ASHCROFT, Mr. THOMAS, Mr. ABRAHAM, Mr. GRASSLEY, Mr. HELMS, Mr. INHOFE, Mr. SESSIONS, Mr. GRAMS, Mr. COCHRAN, Mr. HUTCHINSON, and Ms. SNOWE):

S. 602. A bill to amend chapter 8 of title 5, United States Code, to provide for congressional review of any rule promulgated by the Internal Revenue Service that increases Federal Revenue, and for other purposes; to the Committee on Governmental Affairs.

By Mr. SHELBY:

S. 603. A bill to promote competition and greater efficiency of airlines to ensure the rights of airline passengers, to provide for full disclosure to those passengers, and for other purposes; to the Committee on Commerce, Science, and Transportation.

SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

The following concurrent resolutions and Senate resolutions were read, and referred (or acted upon), as indicated:

By Mr. MURKOWSKI (for himself, Mr. TORRICELLI, Mr. LOTT, Mr. HELMS, Mr. THOMAS, Mr. BURNS, Mr. KYL, and Mr. ROCKEFELLER):

S. Con. Res. 17. A concurrent resolution concerning the 20th Anniversary of the Taiwan Relations Act; to the Committee on Foreign Relations.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mrs. FEINSTEIN:

S. 585. A bill to require health insurance coverage for certain reconstructive surgery; to the Committee on Health, Education, Labor, and Pensions.

RECONSTRUCTIVE SURGERY ACT OF 1999

• Mrs. FEINSTEIN. Mr. President, today, I am introducing a bill to require health insurance plans to cover medically necessary reconstructive surgery for congenital defects, developmental abnormalities, trauma, infection, tumors, or disease.

This bill is modeled on a new California law and responds to the growing incidence of denials of coverage by insur-

ance, often managed care. Despite physicians' judgment that surgery is often medically necessary, too many plans are labeling it "cosmetic surgery." The American Medical News calls the HMO's response that these surgeries are cosmetic as, "a classic health plan word game. . . ."

Testifying before the California Assembly Committee on Insurance, Dr. Henry Kawamoto put it well. He said:

It used to be that if you were born with something deforming, or were in an accident and had bad scars, the surgery performed to fix the problem was considered reconstructive surgery. Now, insurers of many kinds are calling it cosmetic surgery and refusing to pay for it.

The Los Angeles Times reported on July 9, 1997, "There has been a virtual wipeout of coverage to repair the appearance of children whose looks are affected by illness, congenital abnormalities or trauma."

Similarly, the New York University Physician reported in their spring 1998 issue:

Before the advent of managed care, repairing abnormalities was considered reconstructive surgery and insurance companies reimbursed for the medical, hospital and surgical costs of their rehabilitation. But in today's reconfigured medical reimbursement system, many insurance companies and managed care organizations will not pay for reconstruction of facial deformities because it is deemed a "cosmetic" and not a "functional" repair.

This bill is endorsed by the March of Dimes, the American Academy of Pediatrics, the National Organization for Rare Disorders, the American Society of Plastic and Reconstructive Surgeons, the American College of Surgeons, the American Association of Pediatric Plastic Surgeons, the American Society of Craniofacial Surgery, the American Society of Maxillofacial Surgeons, the American Society of Plastic and Reconstructive Surgeons and the National Foundation for Facial Reconstruction.

The children who face refusals to pay for surgery are the true evidence that this bill is needed.

Hanna Grempe, a 6-year old from my own state of California, was born with a congenital birth defect, called bilateral microtia, the absence of an inner ear. Once the first stage of the surgery was complete, the Grempe's HMO denied the next surgery for Hanna. They called the other surgeries "cosmetic" and not medically necessary.

Michael Hatfield, a 19-year old from Texas, who has gone through similar struggles. He was born with a congenital birth defect, that is known as a midline facial cleft. The self-insured plan his parents had only paid for a small portion of the surgery which reconstructed his nose. The HMO also refused to pay any part of the surgery that reconstructed his cheekbones and eye sockets. The HMO considered some of these surgeries to be "cosmetic."

Cigna Health Care denied coverage for surgery to construct an ear for a little California girl born without an

ear and only after adverse press coverage reversed its position saying that, "It was determined that studies have shown some functional improvement following surgery."

Qual-Med, another California HMO, denied coverage for reconstructive surgery for a little boy without an ear, a condition called microtia, and after only many appeals and two years delay, authorized it.

The bill uses medically-recognized terms to distinguish between medically necessary surgery and cosmetic surgery. It defines medically necessary reconstructive surgery as surgery "performed to correct or repair abnormal structures of the body caused by congenital defects, developmental abnormalities, trauma, infection, tumors, or disease to (1) improve functions; or (2) give the patient a normal appearance, to the extent possible, in the judgment of the physician performing the surgery." The bill specifically excludes cosmetic surgery, defined as "surgery that is performed to alter or reshape normal structures of the body in order to improve appearance."

Examples of conditions for which surgery might be medically necessary are the following: cleft lips and palates, burns, skull deformities, benign tumors, vascular lesions, missing pectoral muscles that cause chest deformities, Crouson's syndrome (failure of the mid-face to develop normally), and injuries from accidents.

The American Society of Plastic and Reconstructive Surgeons has released a survey on reconstructive surgery, concluding that 53.5 percent of surgeons surveyed have had pediatric patients who in the last two years were denied coverage for reconstructive surgery. Of those same surgeons surveyed whose pediatric patients were totally or partially denied coverage, 74 percent had patients denied for initial procedures and 53 percent denied for subsequent procedures.

Another reason for this bill is that only 17 out of 50 states have state legislation which requires insurance coverage for children's deformities and congenital defects. My own state, California, passed legislation in 1998 requiring insurance plans to cover medically necessary reconstructive surgery, and on September 23, 1998 it was signed by former Governor Pete Wilson. This bill was enacted after many sad personal stories, and hours of testimony were presented to the state legislators.

This bill is an effort to address yet one more development in the health insurance industry that almost daily is creating new hassles when people try to get coverage for the plan they pay for every month.

We need our body parts to function and fortunately modern medicine today often make that happen. We can restore, repair and make whole parts which by fate, accident, genes, or whatever, do not perform as they should. I hope this bill can make that happen. •

By Mr. KOHL (for himself, and Mr. SESSIONS):